Advisory Council on Aging and Disability Services

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Creating choices for elders and adults with disabilities in Seattle-King County

MONTHLY MEETING AUGUST 12, 2005

MEMBERS PRESENT

Staff

CITY OF SEAT	TLE KING COUNTY	UNITED WAY
☐ Thelma Coney	Lisa Yeager, Officer At	✓ Martha Becker
✓ Joanne Brekke	▼ Helen Spencer	Loma Stone
Adam John	☐ John Holecek	▼ Thelma Pegues
Alexandra Tu	☐ John Barnett	Timmie Faghin, Chair
▼ Tom Rasmussen	Larry Verhei	Don Moreland
✓ Larry Low, Secretary	√ Vacant	☐ Midge Levy
☑ Houston Brown	□ Vacant	□ Vacant
☑ Dr. Robert Gross	□ Vacant	☐ Vacant
☐ Vacant	☐ Vacant	☐ Vacant
Excused Absence	Lisa Yeager, John Barnett, Midge Levy, Jo	ohn Holecek, Thelma Coney, Lorna Stone
Guests	Phil Pitruzzello, Art Mussman, Yvonne Arntson, Ninfa Quiroz	
ADS Staff	Rosemary Cunningham, Karen Winston, Andrea Yip	
United Way Staff	Linda Woodall	
King County		

MINUTES

Timmie Faghin, Chair convened the Advisory Council (AC) meeting at 12:05 p.m. and invited everyone attending to introduce themselves. Timmie announced that Gabe Cohen, AC Vice Chair, suffered a major stroke and is in the Kline-Galland Nursing Home, 7500 Seward Park Ave South, Seattle, WA 98118. AC members signed a card for Gabe and are encouraged to send individual cards as well. Timmie also circulated a thank you card for Suzanne Wiley for the excellent article on caregiving that she wrote for the August issue of *Seniors Digest*.

In association with the Area Agency on Aging for Seattle-King County and sponsored by:







PROGRAM TOPIC: CASE MANAGEMENT

Today's program featured three speakers who addressed the topic of Case Management.

Maureen Linehan, ADS Case Management Program South County Manager, provided an overview of the Case Management program. Case Management assists functionally impaired adults in their homes to prevent premature institutionalization. Case managers assess client needs, develop a care plan, implement the service plan, authorize and monitor Medicaid in-home services, and coordinate with service providers in the community. ADS Case Management has two offices, Seattle and Renton. ADS subcontracts with Evergreen Care Network (serving East King County), Asian Counseling and Referral Services (serving Asian immigrants and refugees), Chinese Information and Service Center (serving people who speak Chinese dialects), and the African American Elders Program.

The ADS Case Management has three service areas:

- 1. Medicaid-funded services include Medicaid Personal Care and COPES (Community Options Payment Entry System) and serve people who have limited incomes, are 18 years of age and older, and need in-home assistance with personal care. Over 6,000 Medicaid clients are served countywide.
- 2. Discretionary-funded services are available for 250 clients who are 60 years of age and older and are not eligible for Medicaid or have difficulty accessing services.
- 3. Seattle Housing Authority (SHA) case management offers social services to SHA residents in select buildings.

Tom Trolio, SHA Case Management Supervisor, stated that the purpose of the SHA case managers is to help SHA residents to navigate social and medical systems, so they can access resources they need. Eleven SHA case managers, one nurse, and a social service aide serve 49 buildings (23 Seattle Senior Housing Project, 28 Low Income Public Housing, and 2 new constructions) with 4,000+ residents. ADS partners with Asian Counseling and Referral Service and Chinese Information Service Center to provide case management to SHA residents. 2004 service data for SHA Case Managers includes:

- 9,290 hours of building office hours
- 7,918 contacts with information and referral or assistance level services
- 1,639 cases
- 29.6% limited English speaking clients
- 639 referrals to the ADS Team nurse
- 22 psychiatric consultations
- 5 crisis incident responses (assault, fire, resident deaths, shooting)
- 10 trainings for SHA staff
- 95.4% rate of eviction prevention (186 out of 197)

Tom cited some examples of residents who have been assisted by Sean Walsh, a SHA case manager. The story of Ms. B who Sean worked with for over a year highlights many of the

challenges that case managers and clients face in navigating the complicated social and health system. A resident of Jefferson Terrace notified Sean that Ms. B was crying at one of the benches. He invited her into his office, and she told him that her mother had recently died. She declined Sean's offer of assistance at the time, but later relayed to him that this informal encounter was important in identifying Sean as a resource in the future.

Ms. B returned to Sean for help when she was diagnosed with Multiple Sclerosis. She lost her job, her health insurance, and the sense of independence she had taken pride in throughout her life. She faced applying for unemployment, GAU, food stamps, Social Security Disability, rent assistance, and COPES in-home services among other programs, all in the course of recovering from surgery and coping with the symptoms of MS.

In his role as case manager, Sean took the following steps to help Ms. B:

- 1. Contact an adult day health provider for assistance with monitoring her blood pressure.
- 2. Contact Employment Security to complete via the Internet an application for unemployment.
- 3. Contact DSHS to complete a GAU, food stamp, and SSI application.
- 4. Meet with SHA staff to negotiate a rent reduction request.
- 5. Request a DSHS evaluation for in-home services so that she could have in-home support when she returned from the hospital.

Coordinating all of the programs needed by Ms. B was not a simple process and Sean had to follow up on several occasions with the various agencies. Without a skilled navigator, Ms. B would have lost her housing and independence and may have ended up living in a setting that would have been more costly and restrictive that Ms. B needed or desired. It is rare that case management work gets attention, because the work is preventative, preventing bad outcomes such as evictions or unnecessary hospitalizations. However, Ms. B gave us positive recognition when she recounted her story when Mayor Nickels and Tom Tierney, SHA Director, visited a monthly resident meeting at Jefferson Terrace.

Brad Hoover, a case manager at the Renton office, is a mental health counselor and has been with ADS for one year. The South County office has three teams consisting of several case managers, one nurse, and one social service aide and serves 2,000 people. Brad has a 92 client caseload with the following characteristics: 35 are male, 57 female, and 32 require translators (Ukrainian and Somali). His oldest client is 92 and the youngest is 24.

Brad gave case examples for two of his clients. Mrs. A is a Ukrainian immigrant who came to the U.S. 7 years ago with her daughters and extended family members. She supported her family at the expense of her education and stopped going to school in the third grade. She did hard labor during WWII and sustained major injuries to her legs and knees. She also lived near Chernobyl and was exposed to radiation from the nuclear accident of the late 1980s. She has kidney failure, skin breakdown, burning sensations in her eyes and on her skin, dizziness and vomiting, and scored very high on the depression questionnaire. Brad noted that Mrs. A's story is not uncommon for case management clients. Many clients have been victimized by significant

geopolitical events. Case managers have to understand the impact of life events on clients as well as their current situation. Brad pointed out that it may not immediately occur to case managers who have grown up in the U.S. that fellow community members require services to help recover from the aftermath of torture, confinement, ethnic cleansing, forced/hard labor, or violent discrimination based on religion, nationality, or political affiliation. Adult literacy is also an issue for many clients who cannot read or write in their own language let alone English.

The second client story Brad presented was a single elderly female who lives alone and doesn't have family support available to her. She was born in the late 30s and is 66 years old. Her main issues are: arthritis and associated pain, congestive heart failure, diabetes, increasing wheel chair dependence, and the use of an oxygen tank. She has formed a bond with her agency caregiver who is from Somalia. The client considers this opportunity of cross-cultural learning a blessing. Much of this client's emotional support and emergency needs are met through her church fellowship. The team social service aide has helped this client with filling out complicated paperwork, installing grab bars, organizing her move to a new apartment, arranging for her to receive new clothes including a winter coat, accessing farmers' market vouchers, and finding heating assistance.

Brad is responsible for assessing clients' conditions. Case managers have to ask a lot of very personal questions and have access to very sensitive and private information. This is a difficult reality for clients to accept especially clients in their 20s and 30s who are driven to be independent. Case managers also have to advocate for clients, help with problem solving, as well as maintain compliance with state and federal standards and agency protocols.

Hueling Chan, Clinical & Case Management Director at Chinese Information and Referral Center (CISC), gave a case example about a 76-year old, legally blind Chinese woman whose husband had passed away. The apartment manager notified CISC that the client was not paying rent. The case manager visited the client in her home and found no food in the refrigerator and very little in the apartment. Her husband, whom she married in China, had fled to Hong Kong and then the U.S. They were separated for 30 years until she came to visit and stayed on. She had no legal papers and had no access to the bank account which had been emptied by her son. She has mobility limitations and was mourning her husband's death. Hueling negotiated with the apartment management to give her time to find funds to pay the rent. A Chinese charity gave her rent money and Hueling helped the client apply for Meals on Wheels, COPES, GAU, and emergency alien medical assistance. She found a pro bono attorney to help with the legal process so that she would not be at risk of deportation. The client hadn't seen a doctor for ten years and was diagnosed with cancer. She had surgery and chemotherapy and has been stable, living in her apartment for three years. Agency providers are helping her with chores and personal care tasks. She has one more step in the legal process before she receives a green card.

The four presenters answered several questions from Advisory Council members about eligibility for COPES, funding sources for SHA, wait lists for housing, access to medical supplies, and numbers of homeless elders. Tom Trolio mentioned that case managers contact Sharehouse when a client needs furniture and other items for homeless people who are moving

into SHA units. AC members asked how people can donate furniture to Sharehouse and suggested that a notice in Seniors Digest would be a good idea, since so many older people are downsizing and would like to donate items.

BUSINESS MEETING

Action Taken: It was moved/seconded and passed that the July 15, 2005 minutes be approved after correcting the Universal Design Coalition Meeting date to September 16th, not September 15th.

COMMITTEE AND TASK FORCE REPORTS

Seattle City Council

Tom Rasmussen reported that four City of Seattle AC members (Alexandra Tu, Joanne Brekke, Adam John, and Larry Low) were reappointed at the Health and Human Services Committee meeting. The Alliance for Retired Americans is asking for a resolution supporting health care for all on the ballot in the fall. Tom is concerned about how the public will respond to an advisory ballot. He is also concerned that this would set a precedent for other groups wanting advisory ballots in the future. It is also a federal issue over which the City has no control. However, he is also concerned about the health care crisis in this country. The City of Seattle spends \$80 million a year for health care out of a \$600 million budget. He asked for AC member views on the topic and encouraged AC members to attend a briefing with Will Parry and the Alliance for Retired Americans on Monday August 15th at 9:30 am in Council Chambers. Martha Becker suggested Group Health as a partner in a Health Care for All discussion. Councilmember Rasmussen is sponsoring a Town Hall Meeting on Elder Abuse and Neglect on Wednesday, September 14th from noon to 2:00 pm. at Seattle City Hall, 600 4th Avenue, Second Floor, Seattle. Comcast negotiations are still in process.

Planning and Allocation Committee

Karen Winston reported that the Planning and Allocations Committee will meet on August 24th to review public comments on the Area Plan Update and Allocation Recommendations.

Outreach and Advocacy Committee

Larry Verhei reported there was a joint meeting today of the Outreach and Advocacy Committee and Health Care Task Force. Committee members discussed the Older Americans Act reauthorization and possible support for Crisis Clinic's request to the City for funding to support local 211 efforts. Discussion on both issues will continue at next month's meeting. Alexandra presented information on traditional herbs and nutrition approaches to health. Members are interested in having alternative medicine as a future AC program topic.

Members discussed training on the Medicare prescription drug system and the confusion that remains about choices and consequences of those choices. Fewer than 30% of seniors signed up for the prescription card. Federal Health and Human Services Department Secretary, Mike

Leavitt, is coming to Holly Park on August 15th from 10:30 to 11:00 am to promote Medicare Part D. Larry Verhei will attend. A Vista volunteer with the Seattle-King County Coalition of Responsible Lending shared a draft brochure being developed for older adults on consumer fraud. The committee provided feedback on the brochure.

Ishbel Dickens, attorney at Columbia Legal Services, gave a presentation on the Washington Responsible Lending Coalition, a group of concerned agencies who act as equal partners. The purpose of the coalition is to advocate for legislation that will better protect consumers from lending fraud which disproportionately affects seniors. Dickens invited the AC to participate in the coalition which currently includes AARP, Fremont Public Association, Washington Churches, Catholic Church, Lutheran Church, and others. One issue of interest is better protection for consumers who use the pay-day loan companies for short-term, extremely high interest loans. Because the coalition is new, it provides a great opportunity to formulate policy for the coalition.

Action Taken: It was moved / seconded and passed that the Advisory Council participate in the Washington Responsible Lending Coalition. Don Moreland volunteered to represent the Advisory Council.

Communications Committee

Timmie Faghin encouraged AC members to read the current issue of Seniors Digest and the great article that Suzanne Wiley wrote about caregiving.

Cash and Counseling

Joanne Brekke attended the Cash and Counseling "Think Tank" meeting on August 10, 2005. The State will submit a request for a waiver to Centers for Medicare & Medicaid Services (CMS) by the end of the month. Seattle/King County and Vancouver/Clark County will begin the pilot with 100 clients in year one and 400 clients in year 2 with a total of 750 clients over 3 years. In the Cash and Counseling Program, clients get a monthly account and the money can be used with more flexibility than the current COPES rules allow. A broader range of choices is available with less oversight and potentially less accountability. David Rolf, President of Service Employees International Union (SEIU) Local 775, asked why the state is shifting case management work from AAA case managers. Since the AAA case managers will be responsible for the annual assessment, what will be the benefit of case supervision by case managers from a separate organization. His question remained unanswered.

Director's Report

Rosemary Cunningham thanked AC members who volunteered and attended the N4A Conference in Bellevue in July. She asked Advisory Council members who attended the N4A conference to share their experience and insights gained from the conference. Most enjoyed the conference sessions they attended. The conference was deemed a success.

The meeting was adjourned at 2:00 p.m.

NEXT MEETING

Friday, September 9, 2005 12:00 – 2:00 p.m. 13th Floor Conference Room Alaska Building 618 Second Ave, Seattle, WA 98104 www.adsadvisorycouncil.org

Larry Low, Secretary
